

06-08-00

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## UTILITY

PATENT APPLICATION  
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

|  |               |             |    |
|--|---------------|-------------|----|
| Attorney Docket No.                            | 10717RNUS01U  | Total Pages | 58 |
| First Named Inventor or Application Identifier |               |             |    |
| Kahveci, T.                                    |               |             |    |
| Express Mail Label No.                         | EL355509825US |             |    |

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ Fee Transmittal Form  
(Submit an original, and a duplicate for fee processing)
2. ☒ Specification [Total Pages 44]  
(preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
3. ☒ Drawing(s) (35 USC 113) [Total Sheets 8]
4. Oath or Declaration [Total Pages 3]
  - a. ☐ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)  
(Note Box 5 below)
  - i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting Inventor(s) named in the prior application, see 37 CFR 1.63(d) and 1.33 (b).
5. ☐ Incorporation By Reference (usable if Box 4b is checked)  
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being a part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

6. ☐ Microfiche Computer Program (Appendix)
7. ☐ Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Copy
  - b. ☐ Paper Copy (identical to computer copy)
  - c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

8. ☐ Assignment Papers (cover sheet & document(s))
9. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
10. ☐ English Translation Document (if applicable)
11. ☐ Information Disclosure ☐ Copies of IDS  
Statement (IDS)/PTO-1449 Citations
12. ☐ Preliminary Amendment
13. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
14. ☐ Small Entity ☐ Statement filed in prior application,  
Statement(s) Status still proper and desired
15. ☐ Certified Copy of Priority Document(s)  
(if foreign Priority is claimed)
16. ☐ Other: \_\_\_\_\_

## 17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_/\_\_\_

## 18. CORRESPONDENCE ADDRESS

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| Typed or Printed Name<br>J. Erik Fako |          |           | Reg. No.<br>42,522       |                            |  |
| Signature<br><i>J. Erik Fako</i>      |          |           | Date<br>6/7/00           | Deposit Account<br>User ID |  |

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 1c813 U.S. PTO

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| <b>FEE TRANSMITTAL</b><br><br>Note: Effective October 1, 1997.<br>Patent fees are subject to annual revision. | <b>Complete if Known</b> |                        |              |
|   | Application Number       |                        |              |
|   | Filing Date              |                        |              |
|   | First Named Inventor     | Kahveci, T.            |              |
|   | Group Art Unit           |                        |              |
|   | Examiner Name            |                        |              |
| <b>TOTAL AMOUNT OF PAYMENT</b>  | <b>(\$)</b> 1,626.00     | Attorney Docket Number | 10717RNUS01U |

1c571 U.S. P.T.  
09/589414  
06/07/00

| <b>METHOD OF PAYMENT (check one)</b>  | <b>FEE CALCULATION (continued)</b>   |                 |                 |  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
|---|--|-----------------|-----------------|--|-----------------|-----------------|----------|-----|-----|-----|------------------------|-------------------------------------|-----|-----|-----|-----|-----------------------------------|--|-----|-----|-----|-----|--------------------------|---------------------------|-----|-----|------|-----|---|--|-----|-----|------|-----|---|--|---------------------------------|-----|-------|-----|-------|--|--|-----|-----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|------|-----|-----|---|--|-----|------|-----|-----|--|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|--------------------------|--|-----|------|-----|------|---|--|-----|-----|-----|----|----------------------------------|--|-----|------|-----|-----|-----------------------------------|--|-----|------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|---|--|-----|-----|-----|-----|--|--|-----|----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|---------------------------|--|--|--|--|--|---------------------------|--|--|--|--|--|------------------------------------|--|--|--|--|--|----------------------------|--|--|--|--|
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit and over payment to:<br>Deposit Account Number <b>50-0873</b><br>Deposit Account Name<br><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee in 37 CFR 1.18 at the Mailing of the Notice of Allowance<br>2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other  | <b>3. ADDITIONAL FEES</b> <table border="1"><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Small Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr><tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr><tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr><tr><td>147</td><td>2520</td><td>147</td><td>2520</td><td>For filing a request for reexamination</td><td></td></tr><tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr><tr><td>113</td><td>1840*</td><td>113</td><td>1840*</td><td>Request publication of SIR after Examiner action</td><td></td></tr><tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr><tr><td>116</td><td>380</td><td>216</td><td>190</td><td>Extension for reply within second month</td><td></td></tr><tr><td>117</td><td>870</td><td>217</td><td>435</td><td>Extension for reply within third month</td><td></td></tr><tr><td>118</td><td>1360</td><td>218</td><td>680</td><td>Extension for reply within fourth month</td><td></td></tr><tr><td>128</td><td>1850</td><td>228</td><td>925</td><td>Extension for reply within fifth month</td><td></td></tr><tr><td>119</td><td>300</td><td>219</td><td>150</td><td>Notice of Appeal</td><td></td></tr><tr><td>120</td><td>300</td><td>220</td><td>150</td><td>Filing a Brief in support of an appeal</td><td></td></tr><tr><td>121</td><td>260</td><td>221</td><td>130</td><td>Request for oral hearing</td><td></td></tr><tr><td>138</td><td>1510</td><td>138</td><td>1510</td><td>Petition to institute a public use proceeding</td><td></td></tr><tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr><tr><td>141</td><td>1210</td><td>241</td><td>605</td><td>Petition to revive- unintentional</td><td></td></tr><tr><td>142</td><td>1210</td><td>242</td><td>605</td><td>Utility issue fee (or reissue)</td><td></td></tr><tr><td>143</td><td>430</td><td>243</td><td>215</td><td>Design issue fee</td><td></td></tr><tr><td>144</td><td>580</td><td>244</td><td>290</td><td>Plant issue fee</td><td></td></tr><tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr><tr><td>126</td><td>240</td><td>126</td><td>240</td><td>Submission of Information Disclosure Statement</td><td></td></tr><tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr><tr><td>146</td><td>760</td><td>246</td><td>380</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr><tr><td>149</td><td>760</td><td>249</td><td>380</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr><tr><td colspan="5">Other fee (specify) _____</td><td></td></tr><tr><td colspan="5">Other fee (specify) _____</td><td></td></tr><tr><td colspan="5">* Reduced by Basic Filing Fee Paid</td><td></td></tr><tr><td colspan="5"><b>SUBTOTAL (3) (\$)</b> 0</td></tr></tbody></table> | Large Fee Code  | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description | Fee Paid | 105 | 130 | 205 | 65                     | Surcharge - late filing fee or oath |     | 127 | 50  | 227 | 25                                | Surcharge - late provisional filing fee or cover sheet |     | 139 | 130 | 139 | 130                      | Non-English specification |     | 147 | 2520 | 147 | 2520  | For filing a request for reexamination |     | 112 | 920* | 112 | 920*  | Requesting publication of SIR prior to Examiner action |                                 | 113 | 1840* | 113 | 1840* | Request publication of SIR after Examiner action |  | 115 | 110 | 215 | 55 | Extension for reply within first month |  | 116 | 380 | 216 | 190 | Extension for reply within second month |  | 117 | 870 | 217 | 435 | Extension for reply within third month |  | 118 | 1360 | 218 | 680 | Extension for reply within fourth month |  | 128 | 1850 | 228 | 925 | Extension for reply within fifth month |  | 119 | 300 | 219 | 150 | Notice of Appeal |  | 120 | 300 | 220 | 150 | Filing a Brief in support of an appeal |  | 121 | 260 | 221 | 130 | Request for oral hearing |  | 138 | 1510 | 138 | 1510 | Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  | 141 | 1210 | 241 | 605 | Petition to revive- unintentional |  | 142 | 1210 | 242 | 605 | Utility issue fee (or reissue) |  | 143 | 430 | 243 | 215 | Design issue fee |  | 144 | 580 | 244 | 290 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Petitions related to provisional applications |  | 126 | 240 | 126 | 240 | Submission of Information Disclosure Statement |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 146 | 760 | 246 | 380 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 149 | 760 | 249 | 380 | For each additional invention to be examined (37 CFR 1.129(b)) |  | Other fee (specify) _____ |  |  |  |  |  | Other fee (specify) _____ |  |  |  |  |  | * Reduced by Basic Filing Fee Paid |  |  |  |  |  | <b>SUBTOTAL (3) (\$)</b> 0 |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)  | Small Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 105   | 130  | 205             | 65              | Surcharge - late filing fee or oath  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 127   | 50   | 227             | 25              | Surcharge - late provisional filing fee or cover sheet                     |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 139   | 130  | 139             | 130             | Non-English specification  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 147   | 2520   | 147             | 2520            | For filing a request for reexamination                                     |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 112   | 920*   | 112             | 920*            | Requesting publication of SIR prior to Examiner action                     |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 113   | 1840*  | 113             | 1840*           | Request publication of SIR after Examiner action                           |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 115   | 110  | 215             | 55              | Extension for reply within first month                                     |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 116   | 380  | 216             | 190             | Extension for reply within second month                                    |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 117   | 870  | 217             | 435             | Extension for reply within third month                                     |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 118   | 1360   | 218             | 680             | Extension for reply within fourth month                                    |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 128   | 1850   | 228             | 925             | Extension for reply within fifth month                                     |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 119   | 300  | 219             | 150             | Notice of Appeal   |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 120   | 300  | 220             | 150             | Filing a Brief in support of an appeal                                     |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 121   | 260  | 221             | 130             | Request for oral hearing   |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 138   | 1510   | 138             | 1510            | Petition to institute a public use proceeding                              |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 140   | 110  | 240             | 55              | Petition to revive - unavoidable   |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 141   | 1210   | 241             | 605             | Petition to revive- unintentional  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 142   | 1210   | 242             | 605             | Utility issue fee (or reissue)   |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 143   | 430  | 243             | 215             | Design issue fee   |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 144   | 580  | 244             | 290             | Plant issue fee  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 122   | 130  | 122             | 130             | Petitions to the Commissioner  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 123   | 50   | 123             | 50              | Petitions related to provisional applications                              |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 126   | 240  | 126             | 240             | Submission of Information Disclosure Statement                             |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 581   | 40   | 581             | 40              | Recording each patent assignment per property (times number of properties) |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 146   | 760  | 246             | 380             | Filing a submission after final rejection (37 CFR 1.129(a))                |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 149   | 760  | 249             | 380             | For each additional invention to be examined (37 CFR 1.129(b))             |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| Other fee (specify) _____   |  |                 |                 |  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| Other fee (specify) _____   |  |                 |                 |  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| * Reduced by Basic Filing Fee Paid  |  |                 |                 |  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| <b>SUBTOTAL (3) (\$)</b> 0  |  |                 |                 |  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| <b>1. FILING FEE</b> <table border="1"><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Small Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101</td><td>690</td><td>201</td><td>345</td><td>Utility filing fee</td><td>690</td></tr><tr><td>106</td><td>310</td><td>206</td><td>155</td><td>Design filing fee</td><td></td></tr><tr><td>107</td><td>480</td><td>207</td><td>240</td><td>Plant filing fee</td><td></td></tr><tr><td>108</td><td>690</td><td>208</td><td>345</td><td>Reissue filing fee</td><td></td></tr><tr><td>114</td><td>150</td><td>214</td><td>75</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5"><b>SUBTOTAL (1) (\$)</b> 690</td><td></td></tr></tbody></table>  | Large Fee Code   | Entity Fee (\$) | Small Fee Code  | Entity Fee (\$)  | Fee Description | Fee Paid        | 101      | 690 | 201 | 345 | Utility filing fee     | 690                                 | 106 | 310 | 206 | 155 | Design filing fee                 |  | 107 | 480 | 207 | 240 | Plant filing fee         |                           | 108 | 690 | 208  | 345 | Reissue filing fee                              |  | 114 | 150 | 214  | 75  | Provisional filing fee                                  |  | <b>SUBTOTAL (1) (\$)</b> 690    |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)  | Small Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 101   | 690  | 201             | 345             | Utility filing fee   | 690             |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 106   | 310  | 206             | 155             | Design filing fee  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 107   | 480  | 207             | 240             | Plant filing fee   |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 108   | 690  | 208             | 345             | Reissue filing fee   |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 114   | 150  | 214             | 75              | Provisional filing fee   |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| <b>SUBTOTAL (1) (\$)</b> 690  |  |                 |                 |  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| <b>2. CLAIMS</b> <table border="1"><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Small Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>103</td><td>18</td><td>303</td><td>9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>102</td><td>78</td><td>202</td><td>39</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>104</td><td>260</td><td>204</td><td>130</td><td>Multiple dependent claim</td><td></td></tr><tr><td>109</td><td>78</td><td>209</td><td>39</td><td>Reissue independent claims over original patent</td><td></td></tr><tr><td>110</td><td>18</td><td>210</td><td>9</td><td>Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="5"><b>SUBTOTAL (2) (\$)</b> 936.00</td><td></td></tr></tbody></table> | Large Fee Code   | Entity Fee (\$) | Small Fee Code  | Entity Fee (\$)  | Fee Description | Fee Paid        | 103      | 18  | 303 | 9   | Claims in excess of 20 |                                     | 102 | 78  | 202 | 39  | Independent claims in excess of 3 |  | 104 | 260 | 204 | 130 | Multiple dependent claim |                           | 109 | 78  | 209  | 39  | Reissue independent claims over original patent |  | 110 | 18  | 210  | 9   | Reissue claims in excess of 20 and over original patent |  | <b>SUBTOTAL (2) (\$)</b> 936.00 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)  | Small Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 103   | 18   | 303             | 9               | Claims in excess of 20   |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 102   | 78   | 202             | 39              | Independent claims in excess of 3  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 104   | 260  | 204             | 130             | Multiple dependent claim   |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 109   | 78   | 209             | 39              | Reissue independent claims over original patent                            |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| 110   | 18   | 210             | 9               | Reissue claims in excess of 20 and over original patent                    |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |
| <b>SUBTOTAL (2) (\$)</b> 936.00   |  |                 |                 |  |                 |                 |          |     |     |     |                        |                                     |     |     |     |     |                                   |  |     |     |     |     |                          |                           |     |     |      |     |   |  |     |     |      |     |   |  |                                 |     |       |     |       |  |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                   |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |                            |  |  |  |  |

|                       |                     |                                 |        |
|-----------------------|---------------------|---------------------------------|--------|
| <b>SUBMITTED BY</b>   |                     | <b>Complete (if applicable)</b> |        |
| Typed or Printed Name | J. Erik Fako        | Reg. No.                        | 42,522 |
| Signature             | <i>J. Erik Fako</i> | Date                            | 6/7/00 |
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J. Erik Fako  
Senior Counsel

June 7, 2000

Box Patent Application  
Assistant Commissioner  
for Patents  
Washington, D.C. 20231-9999

Re: U. S. Patent Application  
Docket No. 10717RNUS01U  
Entitled : A Computer System for Managing Data Exchanges Among  
a Plurality of Network Nodes

Dear Sir:

Enclosed is a patent application including formal papers as follows:

Applicant: Tunc M. Kahveci, et al.

Title : A Computer System for Managing Data Exchanges Among a Plurality  
of Network Nodes

No. Pages Specification: 30; Claims: 13; Abstract: 1; Informal Drawings: 8;  
Unexecuted Power of Attorney

Kindly acknowledge receipt of the foregoing by returning the enclosed self-  
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Sincerely,

A handwritten signature in cursive script, appearing to read "Erik Fako".

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JEF:sfp  
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09/589414  
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I hereby certify that the accompanying application is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Box Patent Application, Assistant Commissioner for Patents, Washington, DC 20231.

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